

The Studio

2013 2014 Registration

Dancer's Name : _____ Age: _____ Birthday: _____

Parent's Name: _____

Address: _____

City, State, Zip _____

Home Phone: _____ Mother's Cell _____ Father's Cell _____

Text #: _____

Email Address: _____

Classes: _____ Day/Time: _____

I do not hold The Studio, Rivers Walker or anyone affiliated with the school responsible for injuries sustained during the normal course of class. I also agree to pay monthly tuition of _____ for 10 months of classes as well as _____ for costumes and a \$50 Revue fee due in March unless formally withdrawing from class through The Studio office. All fees are non-refundable.

Parent signature: _____

Due with Registration Form:

Registration Fee: \$35.00

Uniform Fee: \$ 40.00 Size: _____

1st Months Tuition: _____

(all fees after the registration fee will be taken only by automatic bank draft)

Permission to photograph your child for use in Studio emails and literature: yes no

Please return with the \$35 registration fee, uniform fee, and 1st month's tuition to:

Rivers Walker

258 Brae Burn Drive

Jackson, Ms. 39211